Siskiyou County Mental Health Services Act

Prevention and Early Intervention Services

Request for Applications

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MHSA Background

More than 2 million children, adults, and seniors are affected by severe mental illnesses every year in California. The Mental Health Services Act (Proposition 63) was passed by voters in 2004 and is funded by a one percent income tax on personal incomes in excess of $1 million per year. It is designed to expand and transform California's behavioral health system to enhance services for individuals with, and at risk of, serious mental health issues, and their families. MHSA addresses a broad continuum of prevention, early intervention, and service needs and the necessary infrastructure, technology, and training elements that effectively support the public behavioral health system.

Siskiyou County Behavioral Health is seeking one or more non-governmental, community-based organizations to provide Prevention and Early Intervention program services in communities throughout Siskiyou County.

Procuring and Contracting Department/Division

The contract resulting from this RFA process will be administered by the Siskiyou County Health and Human Services Agency – Behavioral Health Division.

Prevention and Early Intervention (PEI)

PEI Programs are governed by specific regulations, which can be found here. These programs are designed to prevent mental illnesses from becoming severe and disabling, with an emphasis on improving timely access to services for underserved populations. Proposition 63 PEI programs are intended to:

a) *Expand the provision of high quality Mental Health Services Act (MHSA) Prevention and Early Intervention (PEI) programs at the county level in California.*

b) *Increase the number of PEI programs and systems, including those utilizing community-defined practices that focus on reducing disparities for unserved, underserved, and inappropriately served racial, ethnic, and cultural communities.*

c) *Reduce unnecessary hospitalizations, homelessness, suicides, and inpatient days by appropriately utilizing community-based services and improving timely access to prevention and early intervention services.*

d) *Increase participation in community activities, school attendance, social interactions, physical and primary health care services, personal bonding relationships, and rehabilitation, including employment and daily living function development for clients.*

e) *Increase collaboration and coordination among primary care, mental health, and aging service providers, and reduce hesitance to seek treatment and services due to mental health stigma.*

f) *Create a more focused approach for PEI requirements.*

g) *Increase programmatic and fiscal oversight of county MHSA-funded PEI programs.*

h) *Encourage counties to coordinate and blend funding streams and initiatives to ensure services are integrated across systems.*

i) *Encourage counties to leverage innovative technology platforms.*

j) *Reflect the stated goals as outlined in the PEI component of the MHSA* (WIC § 5840.5).

PEI Requirements

Programs must be:

Evidence-based: Evidence-based practice means activities for which there is scientific evidence consistently showing improved mental health outcomes for the intended population, including, but not limited to, scientific peer-reviewed research using randomized clinical trials.[1]

Or

Promising Practice: Programs and activities for which there is research demonstrating effectiveness, including strong quantitative and qualitative data showing positive outcomes, but the research does not meet the standards used to establish evidence-based practices and does not have enough research or replication to support generalizable positive public health outcomes.

Or

Community-defined evidence: Community and or practice-based evidence means a set of practices that communities have used and determined to yield positive results by community consensus over time, which may or may not have been measured empirically. Community and or practice-defined evidence takes a number of factors into consideration, including worldview, historical, and social contexts of a given population or community, which are culturally rooted.

Programs must also:

1. Improve timely access to services for individuals and/or families of underserved populations.[2]
2. Be provided in a convenient, accessible, acceptable, and culturally appropriate setting.
3. Promote, design, and implement in ways that reduce and circumvent stigma and discrimination related to being diagnosed with a mental illness/having a mental illness or seeking mental health services and make services accessible, welcoming, and positive.[3]

PEI Programs:

PEI programs must demonstrate:

- A reduction in symptoms and/or improved recovery, including mental, emotional, and relational functioning.

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[1] All definitions on this page can be found at: Cal. Code Regs. Tit. 9, § 3740 - Effective Methods | State Regulations | US Law | LII / Legal Information Institute (cornell.edu)

[2] Improved timely access means to increase the extent to which an individual or family from an underserved population who needs mental health services because of risk or presence of a mental illness receives appropriate services as early in the onset as practicable, through program features such as accessibility, cultural and language appropriateness, transportation, family focus, hours available, and cost of services. Cal. Code Regs. Tit. 9, § 3735 - Prevention and Early Intervention Strategies | State Regulations | US Law | LII / Legal Information Institute (cornell.edu)

[3] Non-Stigmatizing and Non-Discriminatory approaches include, but are not limited to, using positive, factual messages and approaches with a focus on recovery, wellness, and resilience; use of culturally appropriate language, practices, and concepts; efforts to acknowledge and combat multiple social stigmas that affect attitudes about mental illness and/or about seeking mental health services, including but not limited to race and sexual orientation; co-locating mental health services with other life resources; promoting positive attitudes and understanding of recovery among mental health providers; inclusion and welcoming of family members; and employment of peers in a range of roles. Cal. Code Regs. Tit. 9, § 3735 - Prevention and Early Intervention Strategies | State Regulations | US Law | LII / Legal Information Institute (cornell.edu)

- A reduction of risk factors, indicators, and/or an increase in protective factors that may lead to improved mental, emotional, and relational functioning.

Stigma and Discrimination Reduction and Suicide Prevention Programs**:** Activities to reduce negative feelings, attitudes, beliefs, perceptions, stereotypes, and/or discrimination related to being diagnosed with a mental illness, having a mental illness, or to increase acceptance, dignity, inclusion, and equity for individuals and their families.

- A change in attitudes, knowledge, and/or behavior related to mental illness that is applicable to the specific program.
- A change in attitude, knowledge, and/or behavior related to seeking mental health services that are applicable to the specific program.

Early Intervention Programs: Treatment and other services and interventions, including relapse prevention, to address and promote recovery and related to functional outcomes for a mental illness early in its emergence.

Requirements

- Programs shall not exceed 18 months unless the individual receiving the service is identified as experiencing first onset of a serious mental illness or emotional disturbance[4] with psychotic features.[5]
- Early Intervention Program services may include services to parents, caregivers, and other family members of the person with early onset of a serious mental illness.

Prevention Programs: Reduce risk factors for developing a potentially serious mental illness and build protective factors. The goal of this program is to bring about mental health including reduction of the applicable negative outcomes as a result of untreated mental illness for individuals and members of groups or populations whose risk of developing a serious mental illness is greater than average and, as applicable, their parents, caregivers, and other family members. Program services may include relapse prevention for individuals in recovery from a serious mental illness.

Access and Linkage Programs**:** Activities to connect children, youth, adults, and older adults with severe mental illness to medically necessary care and treatment. (e.g. Programs with a primary focus on screening, assessment, referral, telephone helplines, and mobile response.)

Suicide Prevention Programs: Organized activities to prevent suicide because of mental illness. (e.g. targeted information campaigns, suicide prevention networks, capacity building programs, culturally specific approaches, survivor-informed models, screening programs, suicide prevention hotlines or web-based suicide prevention resources, and training and education.)

[4] Serious mental illness or emotional disturbance with psychotic features means: schizophrenia spectrum or other psychotic disorders. These disorders include abnormalities in one or more of the following five domains: delusions, hallucinations, disorganized thinking (speech), grossly disorganized or abnormal motor behavior (including catatonia), and negative symptoms.

[5] In this case, services shall not exceed 4 years.

Key Dates

Table 1

Action	*Date & Time*
RFA Released	February 16, 2022
Intent to Apply Due Date	March 3, 2022
Final Application Due Date	March 29, 2022
Notice of Intent to Award	April 12, 2022

Application Instructions

Entities interested in applying to this RFA must complete all attached documents in order to be considered. Dates listed on Table 1 will be strictly adhered to in order to ensure a fair and equal opportunity for all. Completed applications received by 5:00PM (PST) on March 29, 2022 will be reviewed and scored according to the guidelines listed below, and letters of determination will be issued no later than April 12, 2022. Any questions regarding this process must be sent in writing to the MHSA Coordinator via email at sschlieter@co.siskiyou.ca.us prior to February 23, 2022. All questions and responses will be posted on the Behavioral Health website at www.co.siskiyou.ca.us/behavioralhealth/page/mental-health-services-act

Clarification and/or revisions to the specifications and requirements

If a proposer discovers any significant ambiguity, error, conflict, discrepancy, omission, or other deficiency in the RFA, the vendor should immediately notify the MHSA Coordinator of such error and request modification or clarification of the RFA document.

In the event that it becomes necessary to provide additional clarifying data or information, or to revise any part of this RFA, revisions/amendments and/or supplements will be emailed to all recipients of this initial RFA and posted on the County's website.

Application Submission Instructions

This section contains requirements and instructions for submission of applications to assist the applicant in meeting Siskiyou County MHSA Prevention and Early Intervention (PEI) bidding requirements and to enable the County to evaluate each application uniformly and fairly. Applicants must follow all format instructions, answer all questions and supply all required documents. The County is not liable for any cost incurred by proposers in replying to this Request for Application.

Required Documents

- Attachment 1: Cover Sheet
- Attachment 2: Intent to Apply
- Attachment 3: Proposed Plan
- Attachment 4: Plan Narrative
- Attachment 5: Budget Worksheet Instructions
- Attachment 6: Budget Worksheet
- Attachment 7: Budget Narrative

Applications lacking any of the above-required documents may be rejected.

GENERAL APPLICATION REQUIREMENTS

Knowledge, Skills, and Abilities

- Experience in providing prevention and early intervention services to the target population.
- Knowledge and understanding of a collaborative service program design.
- Ability to deliver services to clients in a culturally competent manner, including those with limited English proficiency and diverse cultural and ethnic backgrounds, and criminal involvement.

Insurance Requirements

Ensure that comprehensive general liability insurance coverage has been secured in an amount not less than one million dollars per occurrence and three million aggregate per year ($1,000,000/$3,000,000). Evidence of such insurance is required for Health & Human Services Agency/Behavioral Health Division contractors.

Packaging and Labeling

Applications must be mailed or delivered in person by close of business on March 29, 2022 to the following address:

Siskiyou County MHSA
c/o Samantha Schlieter
2060 Campus Drive
Yreka, CA 96097

Faxed or emailed applications will not be accepted. Proposals received after the deadline will not be considered. The county reserves the right to reject any and all proposals.

Proposed Plan Instructions

The program plan must demonstrate the applicant's ability to meet all specified qualifications, requirements, and standards outlined in the RFA as well as identify any challenges associated with implementation.

Describe how the funds will be used to support the goals of MHSA PEI, and specifically address how funds will be used to address at least one of the listed requirements above in the "PEI Program" section of this application.

Describe the goals are you trying to achieve with your program. These goals must be measurable and realistic as they will be the foundation of any pre/post exams you will administer to demonstrate program efficacy.

Describe the program activities are you planning in order to achieve each of your goals.

Describe the resources you currently have for implementing your program and achieving your goals. A budget worksheet is attached to more specifically identify your financial needs.

Describe the resources you need to implement your program.

Plan Narrative Instructions

1. Describe how the Applicant will implement the proposed program.
2. Provide the following:
   a. Clearly identify type of staffing you anticipate using to administer the program.
   b. Describe program capacity including age range and number of participants you anticipate serving.
   c. Describe geographic regions within Siskiyou County the program will target.
   d. Include the proposed training plan, if necessary.
   e. Describe how staff/personnel will be used. List the activities to be performed by each position hired through this grant.
   f. Describe how access to protected health information (PHI) will be secured.
   g. An assessment of any risks, challenges, or barriers to program implementation, and how each will be addressed to minimize the impact on program success

Budget Narrative Instructions

The Budget Narrative must be prepared in conjunction with the Budget Worksheet.

1. Hire Staff/Contractors/other non-staff
   a. For each “Hire Staff” listed on the Budget Worksheet, explain how the salaries were determined and provide support for the stated salary.
   b. For each “Hire Contractors or other non-staff” listed on the Budget Worksheet, explain how the costs were determined and provide support for the stated cost.
2. Other Costs (non-staff and non-contracted services)
   a. For each “Other Costs (non-staff and non-contracted services)” listed on the Budget Worksheet, explain what the costs are for, how the costs were determined, and provide support for the stated cost.
3. Curriculum/Class/Group Costs

Application Scoring

Points Available	
Proposed Plan	25
Plan Narrative	25
Budget Worksheet	30
Budget Narrative	20
Total Possible	100

Scores are determined based on the completeness of a given response. Scores are weighted; if a particular item is not applicable, applicants will not be penalized (e.g. programs that offer only Suicide Prevention will not have their score compared to programs that offer Prevention, Early Intervention and Stigma Reduction.)

The County reserves the right, acting in its sole discretion, to reject any and all proposals and waive any and all immaterial bid irregularities. The County reserves the right to negotiate the terms of the contract with the selected proposer prior to entering into a contract. If contract negotiations cannot be concluded successfully with the highest scoring proposer, the County may negotiate a contract with the next highest scoring proposer.

Proposed Plan	
Your proposed program must utilize one of the following:	
1. Evidence-Based	5
2. Promising Practice	5
3. Community-Defined Evidence	5
Total Possible	**5**
Does your proposed program plan address:	
• Improving timely access to services for unserved or underserved populations.	5
• Providing outreach to families, employers, primary care providers, and others to recognize the early signs of potentially severe and disabling mental illness. (if applicable)	Pass/Fail
• Reducing the stigma associated with the diagnosis of a mental illness or seeking mental health services (if applicable)	Pass/Fail
• Reducing discrimination against people with mental illness (if applicable)	Pass/Fail
• Preventing mental illnesses from becoming severe and disabling. (if applicable)	Pass/Fail
• Suicide prevention services (if applicable)	Pass/Fail
• Identify community needs and how they were determined	5
• The proposed use of funds, and how they will be used to provide personnel or peer support services	5
• How the funds will be used to facilitate linkage and access to specialty mental health services	5

Proposed Plan	
• Screen youth for risk factors related to trauma or other mental health conditions, with emphasis on Pre-K through 3rd grade (if applicable)	Pass/Fail
• Have measurable and realistic goals that can be turned into pre/post tests for participants	Pass/Fail
• Resources needed to implement your proposed program	Pass/Fail
Total Possible	**20**
Plan Narrative	
1. Describe how the proposed program will be implemented, including, if applicable, a timeline.	5
2. Recruitment strategy for positions that may be needed to successfully execute the proposed plan.	Pass/Fail
3. Clearly identify if staff will be employees, contracted, or other	Pass/Fail
4. Expected hire date for each position	Pass/Fail
5. Proposed training plan	5
6. Activities that will be performed by each position to be hired through this grant.	5
7. How access to Protected Health Information will be secured	5
8. An assessment of any risks, challenges, or barriers to program implementation and describe how each will be addressed to minimize the impact on program success	5
Total Possible	**25**
Budget Requirements	
1. Budget Worksheet	30
2. Hire Staff/Contractors/other non-staff	5
3. Proposed administrative cost, not to exceed 15% of the annual budget	Pass/Fail
4. Curriculum costs, if any	5
5. Expected costs for Stigma & Discrimination Reduction	Pass/Fail
6. Expected costs for groups (family/youth)	5
7. Community workshop costs	5
8. Other costs (production, other classes or trainings that will be offered)	Pass/Fail
Total Possible	**50**
Overall Possible Total	**100**

Attachment 1

Cover Sheet

Siskiyou County Mental Health Services Act RFA for FY 2022/23

Grant Application Cover Sheet

Name of Applying Entity:

Director or Designee Name and Title:

Date:

Signature: _____

I HEREBY CERTIFY under penalty of perjury that I have the authority to apply for this grant.

Attachment 2

Intent to Apply

This document shall be emailed to the MHSA Coordinator for Siskiyou County by February 18, 2022. Only those Applicants who submit an Intent to Apply will be considered for this Grant.

Name:

Address:

City, State and Zip Code:

Telephone:

Email:

List agency of organization covered under this Intent to bid:

1.
2.
3.

Indicate intended areas of PEI you will be proposing programs for:

- ☐ Prevention
- ☐ Early Intervention
- ☐ Suicide Prevention
- ☐ Outreach & Engagement
- ☐ Access & Linkage
- ☐ Stigma & Discrimination Reduction

Attachment 3

Proposed Plan

Proposed Plan
Describe how the funds will be used to address at least one of the listed requirements above in the "PEI Program" section of this application
1. Reducing symptoms and/or improving recovery, including mental, emotional, and relational functioning.
2. Reducing risk factors, indicators, and/or increasing protective factors that may lead to improved mental, emotional, and relational functioning.
3. Culturally appropriate approaches and settings in which to deliver information
4. **Stigma and Discrimination**
a. Changing attitudes, knowledge, and/or behavior related to mental illness
b. Changing attitudes, knowledge, and/or behavior related to seeking mental health services
5. **Early Intervention (Treatment and other services and interventions, including relapse prevention, to address and promote recovery and related to functional outcomes for a mental illness early in its emergence.)**
a. Timeline of program services to assure that they do not exceed the 18-month limit (see page 6)
b. Services being provided to parents, caregivers, and other family members of the person with early-onset mental illness.

Proposed Plan
6. **Prevention**
a. Reducing risk factors for developing mental illness
b. Building protective factors
c. Relapse prevention
7. **Access & Linkage**
a. Activities planned to connect children, youth, adults, and older adults with severe mental illness to County Behavioral Health.
8. **Suicide Prevention**
a. Target campaigns to inform about suicide prevention
b. Organizing activities to prevent suicide and raise awareness, please provide information
What goals are you trying to achieve with your program? These goals must be measurable and specific. (A minimum of 3 goals)
1. 2. *3.* *4.* *5.*

Proposed Plan
6.
7.
8.
What program activities are you planning in order to achieve each of your goals?
What resources do you currently have to implement your program and achieve your goals? A budget worksheet is attached to identify your financial needs.
What resources do you need to implement your program?

Attachment 4

Plan Narrative

The purpose of the Program Implementation Plan is to illustrate the critical steps in initiating the proposed programs and to identify any challenges associated with implementation.

Describe how Applicant will implement the proposed program
1. Provide the following:
a. Clearly identify the number and type (employee or contracted) of staff necessary to implement the program.
b. Describe the number of individuals you expect to serve in your program, and the age groups you will target (children, transitional age youth, adults, older adults).
c. Describe your ability to provide services throughout Siskiyou County
d. Include the proposed training plan, if any is needed.
e. Describe how staff/personnel will be used. List the activities to be performed by each position funded by this grant.
f. Describe how protected health information (PHI) will be secured?

Describe how Applicant will implement the proposed program

g. Please provide an assessment of any risks, challenges, or barriers to program implementation and describe how each will be addressed to minimize the impact on program success

1 Risk:

How risk will be addressed:

2. Risk:

How risk will be addressed:

3. Risk:

How risk will be addressed:

4. Risk:

How risk will be addressed:

5. Risk:

How risk will be addressed:

Attachment 5

Budget Worksheet Instructions

Applicants are required to complete the Budget Worksheet attached to this application. Applications submitted without a Budget Worksheet will not be considered. Budget line items should only reflect funding requested from MHSA for the project(s) in the application.

The staff and contractors shall be itemized on the Worksheet, and include service providers support staff, staff assigned to data collection and program administration. The information entered into the Budget Worksheet should correspond with the information provided in the **Budget Narrative** or risk being rejected as being incomplete.

The Applicant should provide their best estimate in terms of type of staff being sought for positions and anticipated expenditures.

The following instructions are in worksheet order, and the numbers pertain to each line item identified on the Budget Worksheet. All amounts shall be entered using whole dollars only.

Personnel Expenses:

For each employee/contractor listed on the Budget Worksheet, explain how the salaries were determined and provide support for the stated salary in the narrative.

Curriculum Expenses:

Programs that utilize specific curriculum (e.g. The Harvard Program in Refugee Trauma, Botvin Life Skills) should enter those costs here. This line item should not be used for staff training costs.

Group Expenses:

For each SESSION or MODULE of group activities list the total cost, not the per class cost. If there is not a direct cost associated with the Module make best estimates and note how applicant arrived at said totals in Budget Narrative.

Hosted Events:

For each workshop hosted by the applicant, list the total cost of each. If there is not a direct cost associated with the workshops make best estimates and note how applicant arrived at said totals in Budget Narrative.

Administrative Expenses:

Enter all costs for administering of the program overall, not to exceed 15% of the total program cost.

Operating Expenses:

Supplies needed to implement and effectively run the proposed program such as office supplies, facility improvements/needs, technology, and transportation.

Other Fees:

Any expenses that do not fall into previous headings should be lined out under this category and explained in the Budget Narrative.

Attachment 6

Budget Worksheet

Personnel Expenses	FY 22/23	FY 23/24	Total Projected
			0
			0
			0
			0
			0
			0
		0	

Curriculum Expenses	FY 22/23	FY 23/24	Total Projected
			0
			0
			0
			0
			0
			0
		0	

Group Expenses (e.g. Girls Circle, Why Try)	FY 22/23	FY 23/24	Total Projected
			0
			0
			0
			0
			0
			0
		0	

Hosted Events (e.g. Workshops)	FY 22/23	FY 23/24	Total Projected
			0
			0
			0
			0
			0
			0
		0	

Attachment 6

Budget Worksheet (continued)

Administrative Expenses	FY 22/23	FY 23/24	Total Projected
			0
			0
			0
			0
			0
			0
			0

Operating Expenses	FY 22/23	FY 23/24	Total Projected
			0
			0
			0
			0
			0
			0
			0

Other Fees Not Identified Elsewhere	FY 22/23	FY 23/24	Total Projected
			0
			0
			0
			0
			0
			0
			0

Overall Total From All Areas	
Personnel	0
Cirriculum	0
Group	0
Events	0
Administration	0
Operating Expenses	0
Other Expenses	0
TOTAL FUNDS REQUESTED	0

Attachment 7

Budget Narrative

PROJECT BUDGET NARRATIVE

Contractor Name
Proposed Project Title

Supporting documentation should be added to all items in the narrative to further support the expressed need. If necessary, additional pages may be added to account for all items on the budget worksheet that need further exposition.

1. Personnel Expenses:

   Job Title:

   Role in the Project:

   How their salary was determined:

   Job Title:

   Role in the Project:

   How their salary was determined:

   Job Title:

   Role in the Project:

   How their salary was determined:

   Job Title:

   Role in the Project:

   How their salary was determined:

2. Group Expenses:

   Session/Module Name:

   How overall cost was determined:

Session/Module Name:

How overall cost was determined:

Session/Module Name:

How overall cost was determined:

3. Hosted Events:

Event Title:

How overall cost was determined:

Event Title:

How overall cost was determined:

Event Title:

How overall cost was determined:

4. Other Expenses:

Item needed:

Purpose/function within the proposed project:

How the total was determined:

Item needed:

Purpose/function within the proposed project:

How the total was determined:

Item needed:

Purpose/function within the proposed project:

How the total was determined: